



2025 Fall Soccer Registration Form

Currituck County Parks and Recreation Department



Registration is now open to all Currituck County youth who have reached the age of 5 prior to September 1, 2025, and who have not reached the age of 13 prior to September 1, 2025. A \$40.00 registration fee per child will be charged a maximum of \$80.00 per family per sport. This money will be used to provide insurance, awards and uniforms.

3 WAYS TO REGISTER BY THE DEADLINE OF JULY 28, 2025.

Online	Mail	In-Person Cash or Check Only
Until midnight on the deadline CurrituckRecreation.com	A completed and signed registration form with the proper fee must be received by the deadline.	Until the deadline
Contact CCPRD at 252-232-3007 Prior to 5pm the day of the deadline for help with online registration.	Make check payable to: Currituck County Parks & Recreation 153 Courthouse Road, Suite 306 Currituck, North Carolina 27929	CCPRD 130 Community Way Barco, North Carolina 27917 Monday - Friday 8:00 a.m. – 5:00 p.m.

ANYONE REGISTERING AFTER THE DEADLINE, WILL HAVE TO PAY A \$10.00 LATE FEE PER CHILD AND WILL BE ALLOWED TO REGISTER ONLY IF THERE ARE ANY OPENINGS ON A TEAM!

As always, coaches are needed in all age groups. Without parents willing to volunteer, there may be children who will not be able to participate. If you are willing to coach a team, please indicate in the space provided on the registration form. Remember, without you, your child may not have a coach!

For additional information, please contact CCPRD at 252-232-3007, Monday thru Friday from 8:00 a.m. to 5:00 p.m.

Thanks once again for your participation and your support.

WORKOUT DATES AND TIMES TBA

5-6 COED WILL BE ASSIGNED BY NORTH OR SOUTH NO DRAFT

NOTE: If your child RESIDES in the Moyock Middle School District, he/she will attend the NORTH WORKOUT.
If your child RESIDES in the Currituck Middle School District, he/she will attend the SOUTH WORKOUT.

✂ ————— PLEASE DETACH HERE —————

CURRITUCK COUNTY FALL SOCCER REGISTRATION/PARENT CONSENT FORM

Registration for children who will be 5 years old before September 1, 2025, and must not have turned 13 years old prior to September 1, 2025, are now being accepted for Currituck County Parks and Recreation Soccer league.

Name of Child: _____ Contact Phone: _____
 Age: _____ Date of Birth: _____ Sex: ☐ M ☐ F Contact Phone: _____
 Email: _____ School: _____
 Address: _____ District: ☐ North ☐ South
 City: _____ State: _____ Zip Code: _____
 Subdivision, Road Name or Area of County in which you reside: _____

Check child T-shirt size: <input type="checkbox"/> Youth Small <input type="checkbox"/> Adult Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Adult Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult X-Large <input type="checkbox"/> Adult XXL	I would be interested in volunteering by being a: <input type="checkbox"/> Head Coach <input type="checkbox"/> Assistant Coach
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PARENTS CODE OF CONDUCT

Currituck County Parks & Recreation Department expects all parents to demonstrate good sportsmanship, respect for others, responsibility, fairness, and good citizenship while their child is participating in County sports programs. As a parent I understand that failure to follow the **Code of Conduct for Parents** (available on the County [website](#) and at the Parks & Recreation office) may result in loss of privileges to watch my child's participation. My signature acknowledges that my spouse and/or I have read and understand the code of conduct.

MEDIA RELEASE AGREEMENT

Grant Currituck County permission to use pictures, photos, video recordings, audiotapes, digital images, and the like of my child: ☐ Yes ☐ No
 Review our Media Release Agreement on the County [website](#) or at the Parks & Recreation office.

I, hereby, give my child permission to play Fall Soccer in the Currituck County Parks & Recreation League. I further agree that the league or its representatives will not be held responsible for any accidents or injuries received while participating in this program above the limits covered by the insurance company.

Print Parent/Guardian Name: _____ Signature: _____

Fee: \$40 per child \$80 Family maximum per sport • Date Registration Received: _____ Received By: _____